

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-878)

SERIAL NO.

10/070916

FILING DATE

APPLICANT(S)

CLAIMS

ITEM	AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
		IND.	DEP.	IND.	DEP.
1		1			
2		1		1	
3		2		1	
4		1		1	
5		1		1	
6		1		1	
7	C				
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TOTAL IND.		3			
TOTAL DEP.		4			
TOTAL CLAIMS		7			

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
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TOTAL IND.		3						
TOTAL DEP.		4						
TOTAL CLAIMS		7						

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

Barbara Campbell
National Stage Processing
(703) 305-3831

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